

# Compensation of Hospital Employees

Calendar Year: 2012 Entity Name: Harrison Medical Center								
(A) Employee Name (who does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(B) Breakdown of W-2 and/or 1099 MISC Compensation			(C) Retirement and Deferred Compensation	(D) Non- Taxable Benefits	(E) Total
			(i) Base Compensation	(ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation			
1 Scott Bosch	X		512,091	49,226	11,145	181,286	18,009	771,757
2 Adar Palis			311,988	22,134	68,387	48,010	21,591	472,110
3 Mariel Kagan			260,693	17,993	98,748	37,914	15,359	430,707
4 Sandon Saffier			254,422	18,921	98,486	8,974	24,534	405,337
5 Patricia Cochrell			309,472	22,134	980	48,780	20,009	401,375
6								0
7								0
8								0
9								0
10								0
11								0
12								0
13								0
14								0
15								0

Add Additional lines as needed

Notes:

Please refer to IRS Form 990 and Schedule J for definitions of types of compensation

Form 990 Schedule J <http://www.irs.gov/pub/irs-pdf/i990sj.pdf>

If the five highest paid employees do not include the lead administrator, please report compensation information for the lead administrator on line 1, and for the five highest paid employees without patient care responsibilities on lines 2 through 6.

Please submit compensation information to DOH either by mail, fax or email to the following address:

Washington State Department of Health

Center for Health Statistics/Hospital and Patient Data Section

MS: 47814

Olympia, WA 98504-7814

Fax: (360) 753-4135

email: [hos@doh.wa.gov](mailto:hos@doh.wa.gov)